Parent/Caregiver Information and Consent Form

Dear Parent/Caregiver,

The annual Years 11-12 Day of Wellbeing will be held as follows. All students are expected to attend.

<table>
<thead>
<tr>
<th>Day and Date</th>
<th>THURSDAY MARCH 17th 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td>CGHS</td>
</tr>
<tr>
<td>Cost</td>
<td>$30 to be paid to Office C</td>
</tr>
<tr>
<td>Last day for payment</td>
<td>March 16th</td>
</tr>
<tr>
<td>Teachers attending</td>
<td>CGHS staff will supervise all activities</td>
</tr>
<tr>
<td>Uniform</td>
<td>Full School Uniform</td>
</tr>
</tbody>
</table>

PROGRAM

8.45 – 9.45 Elevate Education Study Skills seminars tailored to each cohort
10 -11am Young Australia performance by award winning slam poet Zohab Khan
11.20 – 12.20 Stress Management & Mindfulness Seminar
12.30 – 1.30 Louder Seminars – Standing Strong in Sinking Sand
2.10 – 3.10 Zeal Theatre – Lucky Country

If you require additional information regarding this activity, please contact Ms Ronayne on 9718 1805.

Please pay in full by March 16th, or consult with your Year Adviser Ms Mawassi (Year 12) or Ms Naisbett (Year 11) to arrange a payment plan.

Yours sincerely

Sue Holden      Ms J Ronayne, HT Student Wellbeing
Principal

Please detach and return to MS MAWASSI or MS NAISBETT (Year Advisers) by March 16th

I hereby consent to participating in the Day of Wellbeing at the school on March 17th.

I understand all students are expected to participate and wear school uniform on the day. If a deposit only is paid by March 16th I agree full payment will be completed by the end of Term 1.

Parent/caregiver signature: ..................................................    Date: ..................................